2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000087476

Entity Name: SWARM INTERACTIVE, INC.

5491 SOUTHWEST 5 STREET

PLANTATION, FL 33317

Address: City-St-Zip: FILED Apr 22, 2008 Secretary of State

Entity Nai	me: SWARWINTERAC	TIVE, INC.			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
1021 SW 2 FORT LAU	2ND CT JDERDALE, FL 33312	US			
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
1021 SW 2 FORT LAU	2ND CT JDERDALE, FL 33312	US			
FEI Number:	: 65-0867399 FEI Num	ber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
OCCHIUZ 1021 SW 2 FORT LAU		US	OCCHIUZZO, LYNN C 1021 SW 2ND CT FORT LAUDERDALE, I	FL 33312 US	
	named entity submits the of Florida.	is statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE: LYNN OCCHIUZZO				04/22/2008	
	Electronic Signatu	re of Registered Age	ent	Date	
Election Car	npaign Financing Trust Fun	d Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () Delete OCCHIUZZO, LYNN C 1021 SW 2ND CT FORT LAUDERDALE, FL 3	3312	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete WITTEKIND, DONALD B 105 WOODSHIRE LANE CHAPEL HILL, NC 27514		Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name:	D () Delete HORNER, R. SCOTT		Title: (Name:) Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: LYNN C. OCCHIUZZO D 04/22/2008